

UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	SP03-162	Total Pages	2
First Named Inventor or Application Identifier: Karl W. Koch, et al			
Title: ACTIVE PHOTONIC BAND-GAP OPTICAL FIBER			
Express Mail Label No.	EV 327190385 US		

## CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR 1.10:

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is Addressed to Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA, 22313-1450

on 11/19/03  
(Date)

Signature



"EXPRESS MAIL" Mailing Label No. EV 327190385 US

## ADDRESS TO:

Mail Stop Patent Application  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

031282 U.S. PTO  
10/716892  
111903

1. <input checked="" type="checkbox"/> * Fee Transmittal Form (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages <u>41</u> ] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R&amp;D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113) [Total Sheets <u>18</u> ]	<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (non US) 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:
4. Oath or Declaration [Total Pages <u>2</u> ] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)</li><li>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul>	

## 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No

Prior application information:

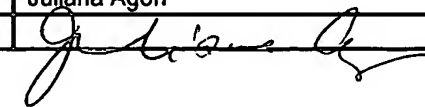
Examiner:

Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label 22928 or ☐ Correspondence address below

NAME					
ADDRESS	Corning Incorporated, SP-TI-3-1				
CITY	Corning	STATE	NY	ZIP CODE	14831
COUNTRY	USA	TELEPHONE	607-974-6574	FAX	(607) 974-3848
Name (Print/Type)	Juliana Agon	Registration No. (Attorney/Agent)		33,468	
Signature			Date	11/19/03	

# FEE TRANSMITTAL for FY 2003

*Complete if Known*

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Karl W. Koch, et al.
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned
Attorney Docket Number	SP03-162

**TOTAL AMOUNT OF PAYMENT (\$788.00)**

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **03-3325**

Deposit Account Name **Corning Incorporated**

- ☒ Charge Any Additional Fees Required Under 37 C.F.R. §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
-----------------------	----------	-----------------	----------

1001	770	Utility filing fee	770.00
1002	340	Design filing fee	
1003	530	Plant filing fee	
1004	770	Reissue filing fee	
1005	160	Provisional filing fee	

**SUBTOTAL (1) (\$770.00)**

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
--------------	--------------	----------------	----------

21	20**	1 x 18	18.00
----	------	--------	-------

Independent Claims	2 - 3**	x 86	= 00.00
--------------------	---------	------	---------

Multiple Dependent	0	=	0.00
--------------------	---	---	------

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Fee (\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent claims in excess of 3
1203	290	Multiple dependent claim, if not paid 0
1204	86	** Reissue independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$18.00)**

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

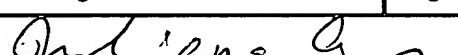
Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
-----------------------	----------	-----------------	----------

1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2,520	For filing a request for reexamination	
1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840	Requesting publication of SIR after Examiner action	
1251	110	Extension for reply within first month	
1252	420	Extension for reply within second month	
1253	950	Extension for reply within third month	
1254	1,480	Extension for reply within fourth month	
1255	2,010	Extension for reply within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1451	1,510	Petition to institute a public use proceeding	
1452	110	Petition to revive - unavoidable	
1453	1,330	Petition to revive - unintentional	
1501	1,330	Utility issue fee (or reissue)	
1502	480	Design issue fee	
1503	640	Plant issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Petitions related to provisional applications	
1806	180	Submission of Information Disclosure Stmt	
8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
1810	770	For each additional invention to be examined (37 C.F.R § 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited examination of a design application	

\*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$)**

**SUBMITTED BY**

**Completed (if applicable)**

Name (Print/Type)	Juliana Agon	Registration No. (Attorney/Agent)	33,468
Signature		Date	11/19/03